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## REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of a utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

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|------------------------|---------------|----|-----|
| Application Number     | 10/619,563    | .2 | Zi  |
| Filing Date            | July 16, 2003 |    |     |
| First Named Inventor   | S. KIDOOKA    |    |     |
| Group Art Unit         | 3739          |    | _   |
| Examiner Name          | M. F. Peffley |    |     |
| Attorney Docket Number | P23565        |    |     |

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

NOTE: 37 C.F.R. §1.114 is effective on May 29, 2000. If the above-identified application was flied prior to May 29,2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. §1.53(d) (PTO/SB/29) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA. See Changes to application Examination and Provisional Application Practice, Interim Rule, 65 Fed. Reg. 14865 (Mar. 20, 2000), 1233 Off. Gaz. Pat. Office 47 (Apr. 11, 2000) which established RCE practice.

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2. Miscellaneous                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |                       |          |                  |                           |                   |  |
| a. Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) of months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. §1.17(i) required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                       |          |                  |                           | - , , ,           |  |
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| á                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <ul> <li>The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.</li> <li>Check in the amount of \$1,120.00 enclosed.</li> <li>If payment in the appropriate amount is not enclosed, the U.S. Patent and Trademark Office is hereby authorized to charge any fees required by this paper, including the RCE fee required under 37 C.F.R. §1.17(e), any extension of time fees (37 C.F.R. §§ 1.136 and 1.17) necessary to render the RCE timely, and any suspension fee or credit any overpayments, to Deposit Account No. 19-0089</li> </ul> |           |                       |          |                  |                           |                   |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                       |          |                  |                           |                   |  |
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| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           | William I<br>Reg. No. | 33,630 > | - 22-0C          | <u>02/23/20</u> 96 JADD01 | 68668672 16619563 |  |
| CERTIFICATE OF MAILING OR TRANSMISSION 798.88 0P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                       |          |                  |                           |                   |  |
| I hereby certify that this correspondence is being deposited with the United States Postal Service as a first class mail in an envelope addressed to: Commissioner For Patents, Mail Stop RCE, PO Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                       |          |                  |                           |                   |  |
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| Sig                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | nature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1         |                       |          | Date             |                           |                   |  |
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